Case 25-20845-GLT Doc 27 Filed 05/02/25 Entered 05/02/25 15:22:12 Desc Main Document Page 1 of 46

Fill in this info	rmation to identify your	case:		
Debtor 1	Matthew A Mange	?S		
	First Name	Middle Name	Last Name	
Debtor 2	Christina L Mange	es		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
Case number	25-20845			
(if known)				

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	119,168.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	82,124.5
	1c. Copy line 63, Total of all property on Schedule A/B	\$	201,292.5
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	88,678.2
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,831.2
	Your total liabilities	\$	124,509.49
Pai	t 3: Summarize Your Income and Expenses		
ŀ.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,269.9
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,373.4
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
<b>3</b> .	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	l, family, or

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Jebtor 1	Matthew A Manges		
Debtor 2	Christina L Manges	Case number (if known)	) <b>25-20845</b>

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,371.29

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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				<u>Do</u> c	cument	Page 3 of 46		_		
Fill	in this informa	tion to identify	your case and th	is filinç	g:					
Deb	otor 1	Matthew A I		Name		Last Name				
	otor 2 use, if filing)	Christina L First Name		Name		Last Name				
Unit	ted States Bank	ruptcy Court for	the: WESTERN	DISTR	ICT OF PENI	NSYLVANIA				
Cas	se number 25	-20845				_				Check if this is an amended filing
	ficial Forn		_							
Sc	chedule	A/B: P	roperty							12/15
	o you own or hav		quitable interest in a	ny resid	lence, building	, land, or similar property?				
1.1				What	t is the propert	y? Check all that apply				
	14 Shady Av	venue		•••••	Single-family		Do not ded	uct secured cla	aims (	or exemptions. Put
	Street address, if a	vailable, or other de	scription		Duplex or mu	ilti-unit building n or cooperative	the amount	t of any secure	d clair	ms on Schedule D: cured by Property.
	Burgettstow	n PA	15021-0000 ZIP Code		Land	d or mobile home	Current va entire prop			rrent value of the rtion you own?
					Timeshare Other		Describe t	he nature of y		wnership interest by the entireties, or
				wno		t in the property? Check one	Fee sim	•		
	Washington	1			Debtor 2 only	,				
	County					Debtor 2 only of the debtors and another		c if this is constructions)	ımuni	ity property
				prop	erty identificat	ou wish to add about this iterion number:	m, such as lo	cal		
				Da-	idonoo					

**Fair Market Value** 

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Debtor 1 Debtor 2						Case number	(if known) <b>25-2</b>	20845	
	ou own or hav	e more	than one, list						
1.2 A di	Adjacent to: 14 Shady Avenue			What	t is the property? Check all that apply				
	at address, if available,			_ □	,			ims or exemptions. Put d claims on Schedule D:	
31166	et address, ii avallable, i	or other des	scription		Duplex or multi-unit building			ns Secured by Property.	
					Condominium or cooperative				
					Manufactured or mobile home				
Rui	rgettstown	PA 15021-0000		_	Land		t value of the	Current value of the	
City	gottotown	State	ZIP Code		Investment property	entire p	property? \$2,500.00	portion you own? \$2,500.00	
Oity			211 0000		Timeshare				
					Other		•	our ownership interest ancy by the entireties, or	
				Who	has an interest in the property? Check of	` r.e	state), if known.		
					☐ Debtor 1 only ☐ Debtor 2 only		imple		
Wa	shington								
Coun	nty				Debtor 1 and Debtor 2 only	_ Ch	☐ Check if this is community property		
					At least one of the debtors and another	. $\square$ (se	e instructions)	inumity property	
				Othe	r information you wish to add about th	is item, such a	item, such as local		
				prop	erty identification number:				
					eage				
				rair	Market Value				
	else drives. If you				Schedule G: Executory Contracts and prcycles	d Unexpired L	eases.		
■ Yes									
3.1 Ma	<sub>ake:</sub> Jeep			Who has a	nn interest in the property? Check one	Do not	deduct secured cla	aims or exemptions. Put	
	Wrangle	r Unlim	nited			the am	ount of any secure	d claims on Schedule D:	
	odel: Sahara			☐ Debtor	•	Credito	is vvno Have Claii	ms Secured by Property.	
	ear: <b>2010</b>			Debtor			t value of the	Current value of the	
•	oproximate mileage:		116,000	_	1 and Debtor 2 only	entire	property?	portion you own?	
	ther information:				one of the debtors and another				
1	ehicle alue Based upo	n Kalla	w Blue	□ Chook	if this is community property		\$7,801.00	\$7,801.00	
	ook Report	n Kene	ey blue		tructions)				
	ook report								
0.0 M	<sub>ake:</sub> Jeep			\ <b>A</b> //		Do not	deduct secured cla	aims or exemptions. Put	
	Massala			_	in interest in the property? Check one	the am	ount of any secure	d claims on Schedule D:	
		1		■ Debtor	•	Credito	Creditors Who Have Claims Secured by		
	ear: 2009  oproximate mileage:		170,000	Debtor			t value of the property?	Current value of the portion you own?	
-	<del></del>			otor 1 and Debtor 2 only		property :	portion you own:		
	Vehicle		- At least	At least one of the debtors and another					
				☐ Check	if this is community property		\$3,725.00	\$3,725.00	
	ook Report		,		tructions)				

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Debto Debto		latthew A N Christina L N	•		Case number (if	known) 2	5-20845
3.3	Make: Model:	Volkswag Jetta	gen	Who has an interest in the property? Check one  Debtor 1 only	the amou	nt of any sec	I claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property.
	Year:	2006		Debtor 2 only	Current v	alue of the	Current value of the
	Approxin	nate mileage:	144,000	☐ Debtor 1 and Debtor 2 only	entire pro		portion you own?
	Other inf	formation:		At least one of the debtors and another			
	Vehicle Value I Book F	Based upor	n Kelley Blue	Check if this is community property (see instructions)		\$577.00	\$577.00
	<i>mples:</i> B No			d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		s	
				n for all of your entries from Part 2, including that number here			\$12,103.00
Part 3			nal and Household Ite				
Do yo	ou own o	or have any l	egal or equitable int	terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	<i>amples:</i> No	goods and f Major applian scribe	ces, furniture, linens	, china, kitchenware			
				able Upon Request			\$3,995.00
Ex	No	Televisions a		eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners;	music colle	ctions; electronic devices
			Electronics				\$950.00
Ex	<i>amples:</i> No	other collection	figurines; paintings, ons, memorabilia, col	prints, or other artwork; books, pictures, or other llectibles	r art objects; stam	np, coin, or	baseball card collections;
Ц	Yes. De	scribe					
Ex	amples:	for sports are Sports, photo musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; o	anoes and	kayaks; carpentry tools;
_		scribe					
E	No	: Pistols, rifles	s, shotguns, ammunit	tion, and related equipment			

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Debtor 1 Debtor 2			v A Manges a L Manges			Case number (if known)	25-20845
	mple	es: Everyd	lay clothes, fur	s, leather coats, des	igner wear, shoes, accessories		
□ No							
■ Ye	es. L	Describe					
			Clothe	es			\$200.00
	ample o	es: Everyo	,,	stume jewelry, enga	gement rings, wedding rings, heirlod	om jewelry, watches, gems, (	gold, silver
			Jewel	ry			\$500.00
<i>Exa</i> □ No	ample o	<b>n animals</b> es: Dogs, Describe	cats, birds, hor	ses			
			Pets:	2 Dogs			\$0.00
for Part 4:	Par Desc	t 3. Write	that number i	heres	art 3, including any entries for pa	nges you have attached	\$5,645.00  Current value of the portion you own? Do not deduct secured
□ No	ample o			•	ome, in a safe deposit box, and on h	and when you file your petiti  Cash on	claims or exemptions.
						hand:	\$0.00
	ample		ing, savings, o		ounts; certificates of deposit; shares with the same institution, list each.		houses, and other similar
					Institution name:		
			17.1.	Checking	First Commonwealth Bacct - 3417	ank	\$733.33
			17.2	Savings	First Commonwealth Ba	ank	\$367.36

Official Form 106A/B Schedule A/B: Property page 4

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	ebtor 1 ebtor 2	Matthew / Christina	_	Case number	(if known)	25-20845
18.		, mutual fund	ls, or publicly traded stocks	okerage firms, money market accounts		
	■ No	nes. Dona iun	us, investment accounts with bit	okerage iiiiis, money market accounts		
			Institution or issuer	name:		
19.	Non-pu	ublicly traded	I stock and interests in incorpo	orated and unincorporated businesses, including a	an interes	st in an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific	information about themName of entity:	% of owners	hip:	
20.	Negotia	iable instrume	nts include personal checks, cas	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.		
		Give specific	information about them Issuer name:			
			ion accounts in IRA, ERISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or prof	it-sharing	plans
	■ Yes. I	List each acco	ount separately. Type of account:	Institution name:		
			Thrift Saving	VA Pittsburgh Health Care Thrift Saving	gs Plan	\$53,623.82
	Examp  ■ No			that you may continue service or use from a company public utilities (electric, gas, water), telecommunication Institution name or individual:		nies, or others
23.			ct for a periodic payment of mone	ey to you, either for life or for a number of years)		
	■ No □ Yes		Issuer name and description.			
24.	26 U.S.0		ation IRA, in an account in a q 1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state t	uition pro	ogram.
	■ No □ Yes		Institution name and description	n. Separately file the records of any interests.11 U.S.C	. § 521(c)	:
25.	Trusts,	, equitable or	future interests in property (o	ther than anything listed in line 1), and rights or po	owers exe	ercisable for your benefit
		Give specific	information about them			
26.			, trademarks, trade secrets, and domain names, websites, procee	nd other intellectual property ds from royalties and licensing agreements		
	☐ Yes.	Give specific	information about them			
27.			s, and other general intangible permits, exclusive licenses, coop	es perative association holdings, liquor licenses, profession	onal licens	ses
	☐ Yes.	Give specific	information about them			
M	oney or p	property owe	ed to you?			Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 5

claims or exemptions.

Filed 05/02/25 Case 25-20845-GLT Doc 27 Entered 05/02/25 15:22:12 Page 8 of 46 Document Debtor 1 Matthew A Manges 25-20845 Debtor 2 Case number (if known) Christina L Manges 28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2025 Tax Refund **Federal** \$9,652.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **VA Pittsburgh Health Care Term Life Christina Manges** \$0.00 Insurance 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$64.376.51 for Part 4. Write that number here.....

Official Form 106A/B Schedule A/B: Property page 6

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.□ Yes. Go to line 38.

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Deb	tor 1	Matthew A Manges	3		
Deb	tor 2	Christina L Manges		Case number (if known)	25-20845
Part		escribe Any Farm- and Commercial Fishing-Related Property Yo you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	t In.	
46. <b>I</b>	Do yoι	u own or have any legal or equitable interest in any farn	n- or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes	s. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
		u have other property of any kind you did not already lis	st?		
	Exam I No	ples: Season tickets, country club membership			
		Give specific information			
	- 100.	Civo oposine imormation			
54.	Add t	the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
				ļ	
Part	8:	List the Totals of Each Part of this Form			
55.	Part '	1: Total real estate, line 2			\$119,168.00
56.	Part 2	2: Total vehicles, line 5	\$12,103.00		
57.	Part 3	3: Total personal and household items, line 15	\$5,645.00		
58.	Part 4	4: Total financial assets, line 36	\$64,376.51		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part (	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+ \$0.00		
62.	Total	personal property. Add lines 56 through 61	\$82,124.51	Copy personal property to	otal <b>\$82,124.51</b>
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$201,292.51

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this info	ormation to identify your	case:	· ·	
Debtor 1	Matthew A Mange	es		
	First Name	Middle Name	Last Name	
Debtor 2	Christina L Mang	es		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA	
Case number	25-20845			
(if known)				☐ Check if th amended f

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)										
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	14 Shady Avenue Burgettstown, PA 15021 Washington County	\$116,668.00		\$38,190.24	11 U.S.C. § 522(d)(1)						
	Residence Fair Market Value Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit							
	Adjacent to: 14 Shady Avenue Burgettstown, PA 15021 Washington	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(5)						
	County Acreage Fair Market Value Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit							
	2010 Jeep Wrangler Unlimited Sahara	\$7,801.00		\$0.00	11 U.S.C. § 522(d)(5)						
	Vehicle Value Based upon Kelley Blue Book Report Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit							
	2009 Jeep Wrangler 170,000 miles Vehicle	\$3,725.00		\$3,725.00	11 U.S.C. § 522(d)(2)						
	Value Based upon Kelley Blue Book Report Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit							

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tor 2 Matthew A Manges Christina L Manges		Case number (if known)	25-20845
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
2006 Volkswagen Jetta 144,000 miles Vehicle	\$577.00	\$577.00	11 U.S.C. § 522(d)(5)
Value Based upon Kelley Blue Book Report Line from Schedule A/B: 3.3		100% of fair market value, up to any applicable statutory limit	
Various Household Goods and Furnishings	\$3,995.00	\$3,995.00	11 U.S.C. § 522(d)(3)
Summary Available Upon Request Line from Schedule A/B: 6.1		100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$950.00	\$950.00	11 U.S.C. § 522(d)(3)
LINE HOIN SCHEUUIE AVB. 1.1		100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00	\$200.00	11 U.S.C. § 522(d)(3)
Line noin <i>Schedule A/D</i> . 1111		100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$500.00	\$500.00	11 U.S.C. § 522(d)(4)
Ellie Holli Golledale 742. 12.1		100% of fair market value, up to any applicable statutory limit	
Pets: 2 Dogs Line from Schedule A/B: 13.1	\$0.00	\$0.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
Cash on hand: Line from Schedule A/B: 16.1	\$0.00	\$0.00	11 U.S.C. § 522(d)(5)
Ellie II oli odiloddio 772. 1011		100% of fair market value, up to any applicable statutory limit	
Checking: First Commonwealth Bank Acct - 3417	\$733.33	\$733.33	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1		100% of fair market value, up to any applicable statutory limit	
Savings: First Commonwealth Bank Acct - 9922	\$367.36	\$367.36	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2		100% of fair market value, up to any applicable statutory limit	
Thrift Saving: VA Pittsburgh Health Care Thrift Savings Plan	\$53,623.82	\$53,623.82	11 U.S.C. § 522(d)(12)
Line from Schedule A/B: 21.1		100% of fair market value, up to any applicable statutory limit	
Federal: 2025 Tax Refund Line from Schedule A/B: 28.1	\$9,652.00	\$9,652.00	11 U.S.C. § 522(d)(5)
LING HUITI SCHGUUIG PVD. <b>20. I</b>		100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Debtor 2	Matthew A Manges Christina L Manges			Case number (if known)	25-20845
	description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Pittsburgh Health Care Term Life	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Ber	reficiary: Christina Manges from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	you claiming a homestead exemption ject to adjustment on 4/01/28 and every to No			led on or after the date of adjustmen	t.)
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case?	?
	□ No				
	☐ Yes				

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		Document Page 13	of 46		
Fill in this inform	nation to identify yo	ur case:			
Debtor 1	Matthew A Mar	nges			
	First Name	Middle Name Last Name			
Debtor 2	Christina L Ma	naes			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	nkruptcy Court for the	e: WESTERN DISTRICT OF PENNSYLVANIA			
Case number	25-20845				
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Forn	o 106D				
		- \\	l less Deservation		
Schedule	D: Creditors	s Who Have Claims Secured	by Propert	у	12/15
	e Additional Page, fill it	. If two married people are filing together, both are eq out, number the entries, and attach it to this form. On			
· · ·	have claims secured b	ov vour property?			
`		this form to the court with your other schedules. Yo	yu haya nathing alaa t	a rapart on this form	
_		•	ou have nothing else t	o report on this form.	
■ Yes. Fill in	all of the information	below.			
Part 1: List A	II Secured Claims				
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
		is a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	action of according to the electric of hallon	value of collateral.	claim	If any
2.1 Corporati	-	Describe the property that secures the claim:	\$10,200.51	\$7,801.00	\$2,399.51
Creditor's Name		2010 Jeep Wrangler Unlimited	<del></del>		<del></del>
		Sahara 116,000 miles			
		Vehicle			
		Value Based upon Kelley Blue Book			
		Report Report Relieved Blue Book			
		As of the date you file, the claim is: Check all that			
Po Box 50		apply.			
Southfield	d, MI 48086	☐ Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
■ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			

**Auto Loan** 

4768

lacksquare At least one of the debtors and another

 $\square$  Check if this claim relates to a

Date debt was incurred 07/18

community debt

lacksquare Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number

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Debtor 1 Matthew A Manges		_	Case number (if known)	25-20845	
First Name Middle N	ame Last Name				
Debtor 2 Christina L Manges First Name Middle N	ame Last Name	_			
2.2 Select Portfolio Servicing	Describe the property that secures		\$72,000.00	\$116,668.00	\$0.00
Creditor's Name	14 Shady Avenue Burgettst 15021 Washington County Residence	own, PA			
10401 Deerwood Park Boulevard	Fair Market Value As of the date you file, the claim is:	Check all that			
Jacksonville, FL 32256	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	Disputed  Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or s	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Mortgage			
Date debt was incurred07/03	Last 4 digits of account num	ber <u>2260</u>			
Washington County Tax	Describe the manufacture of	dha alaim.	\$6,477.76	\$116,668.00	\$0.00
Claim Bureau Creditor's Name	Describe the property that secures  14 Shady Avenue Burgettst		Ψο,τιτιο	Ψ110,000.00 —	Ψ0.00
95 West Beau Sreet Suite 525 Washington, PA 15301  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	15021 Washington County Residence   Fair Market Value     As of the date you file, the claim is: apply.   □ Contingent   □ Unliquidated   □ Disputed   Nature of lien. Check all that apply.	Check all that			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or s	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Tax Claim	1		
Date debt was incurred	Last 4 digits of account num	nber			
Add the dollar value of your entries in C	olumn A on this page. Write that nun	nber here:	\$88,678	27	
If this is the last page of your form, add Write that number here:			\$88,678		
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed	i			
Use this page only if you have others to b trying to collect from you for a debt you o than one creditor for any of the debts that debts in Part 1, do not fill out or submit the	we to someone else, list the creditor you listed in Part 1, list the addition	in Part 1, and	then list the collection age	ncy here. Similarly, if you l	have more
Name, Number, Street, City, State 8 US Bank National Associa PO Box 790408 Saint Louis, MO 63179			nich line in Part 1 did you ente	er the creditor? 2.2	

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		Docum	ient Page 18	o 0f 46		
Fill in this info	ormation to identify your	case:				
Debtor 1	Motthou A Mongo	•				
Deptor i	Matthew A Mange	Middle Name	Last Name			
Debtor 2	Christina L Mange					
(Spouse if, filing)	First Name	Middle Name	Last Name			
	2	WESTERN DISTRIC	T OF DENINGVI VANIA			
United States i	Bankruptcy Court for the:	WESTERN DISTRIC	T OF PENNSYLVANIA	1		
Case number	25-20845					
(if known)					пс	heck if this is an
					_	mended filing
<u>Official Fo</u>	<u>rm 106E/F</u>					
<b>Schedule</b>	E/F: Creditors W	ho Have Unse	cured Claims			12/15
	and accurate as possible. Us			Part 2 for creditors	with NONPRIORITY clair	ns. List the other party to
	ontracts or unexpired leases					
	cutory Contracts and Unexp ditors Who Have Claims Sec					
	continuation Page to this pag					
name and case r	number (if known).	-	•			
Part 1: List	All of Your PRIORITY Un	secured Claims				
1. Do any cred	litors have priority unsecure	d claims against you?				
■ No. Go to	o Part 2.					
☐ Yes.						
<b>—</b> 100.						
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cred	ditors have nonpriority unsec	ured claims against you	?			
_ `						
☐ No. You	have nothing to report in this p	art. Submit this form to the	court with your other sche	edules.		
Yes.						
4 List all of ve	our nonpriority unsecured cl	aims in the alphahetical	order of the creditor who	holds each claim	If a creditor has more tha	n one nonpriority
unsecured c	laim, list the creditor separately	for each claim. For each	claim listed, identify what t	ype of claim it is. Do	o not list claims already inc	luded in Part 1. If more
than one cre Part 2.	editor holds a particular claim, li	st the other creditors in Pa	irt 3.lf you have more than	three nonpriority ur	nsecured claims fill out the	Continuation Page of
ranz.						Total claim
	al One Bank USA NA	Last 4 di	gits of account number	2284	_	\$505.00
•	ority Creditor's Name	When wa	s the debt incurred?	06/18		
	ake City, UT 84130	Wilch We	s the debt medited.	00/10		
	r Street City State Zip Code	As of the	date you file, the claim	s: Check all that ap	pply	
Who in	curred the debt? Check one.					
☐ Deb	tor 1 only	☐ Contir	ngent			
Dob	tor 2 only	☐ Unliqu	=			
	-	· ·				
	tor 1 and Debtor 2 only	☐ Dispu		l alaim.		
	east one of the debtors and and		NONPRIORITY unsecured	a claim:		
	ck if this claim is for a com					
debt	laim subject to offset?		ations arising out of a sepa	ration agreement o	r divorce that you did not	
	aann Subject to offset?	•	priority claims			
■ No		□ Debts	to pension or profit-sharin			
П.,		<b>■</b> a	Credit card	purchases for	r household goods	
☐ Yes		Other	Specify and furnish	inas		

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Debtor Debtor	1 Matthew A Manges 2 Christina L Manges	Case number (if known) 25-2084	5
4.2	Ccs /First Savings Bank	Last 4 digits of account number 8406	\$480.00
	Nonpriority Creditor's Name 500 East 60th Street North Sioux Falls, SD 57104	When was the debt incurred? 02/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Credit card purchases to meet living	
	Yes	Other. Specify expenses	<u> </u>
4.3	Charles Pappas Jr. Nonpriority Creditor's Name	Last 4 digits of account number	\$17,000.00
	732 South Main Street Burgettstown, PA 15021	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did n	ot
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify    Debt related to home improvement expenses	_
4.4	Collection Service Center	Last 4 digits of account number HCT3	\$142.00
	Nonpriority Creditor's Name Po Box 2060	When was the debt incurred? 09/18	
	Fairmont, WV 26555	- Asset de la company de la collège de la co	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did n	ot
	Is the claim subject to offset?	report as priority claims	Л
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify     Collection for Weirton Medical Center	
		5 open,	

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Debto Debto	r 1 Matthew A Manges r 2 Christina L Manges	Case number (if known) 25-20845	
4.5	Collection Service Center  Nonpriority Creditor's Name	Last 4 digits of account number HF3D	\$120.00
	Po Box 2060 Fairmont, WV 26555	When was the debt incurred? 10/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	⊔ Yes	■ Other. Specify Collection for Weirton Medical Center	
4.6	DentalWorks & Orthodontics Robinson	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name Township 6515 Robinson Centre Dr	When was the debt incurred?	
	Pittsburgh, PA 15205  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical debt	
4.7	Fidelity Properties Inc Nonpriority Creditor's Name	Last 4 digits of account number 5922	\$59.00
	885 South Sawburg Avenue Suite 10	When was the debt incurred? 09/18	
	Alliance, OH 44601  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the diamine. Officer all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection for Mikhail Mona Md	

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	or 2 Christina L Manges		Case number (if known)	25-20845	
4.8	Nationwide Recovery	Last 4 digits of account number	2685		\$1,335.00
	Nonpriority Creditor's Name 3000 Kellway Drive	When was the debt incurred?	3/06/19		Ψ1,000.00
	Carrollton, TX 75006  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Medical de	bt		
4.9	Nationwide Recovery	Last 4 digits of account number	2686		\$82.00
	Nonpriority Creditor's Name 3000 Kellway Drive	When was the debt incurred?	3/06/19		
	Carrollton, TX 75006  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sepa	ration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar d	ohto	
	■ No	, ,	•	ebis	
	Yes	Other. Specify Medical de	Dt		
4.1 0	Peoples Natural Gas LLC	Last 4 digits of account number			\$6,234.48
	Nonpriority Creditor's Name 375 N Shore Dr Ste 200	When was the debt incurred?			
	Pittsburgh, PA 15212  Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Oncok all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin		epts	
	☐ Yes	Other. Specify Past due u	tility bill		

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Debt	or 2 Christina L Manges		Case number (if known)	25-20845
4.1	Portfolio Recovery & Associates	Last 4 digits of account number	4237	\$1,575.00
1	Nonpriority Creditor's Name 120 Corporate Boulevard	When was the debt incurred?	06/17	<u> </u>
	Suite 1 Norfolk, VA 23502  Number Street City State Zip Code	As of the date you file, the claim	in Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан тат арргу	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce th	at you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debt	s
	☐ Yes	Other. Specify Collection	for Capital One Bank L	Jsa N.A.
4.1 2	Portfolio Recovery & Associates	Last 4 digits of account number	4355	\$1,206.00
	Nonpriority Creditor's Name 120 Corporate Boulevard Suite 1	When was the debt incurred?	12/16	
	Norfolk, VA 23502	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	1.1.1.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	-	•
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection	for Capital One Bank L	Jsa N.A.
4.1 3	Syncb/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	3800	\$1,115.00
	Po Box 965024 Orlando, FL 32896	When was the debt incurred?	02/14	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce th	at you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debt	s
	☐ Yes	Credit card Other. Specify household	purchases for groceri	es and

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Debtor 1 Matthew A Manges

Debte	Christina L Manges	Case number (if known) 25-20845	j
4.1	TD Bank USA	Last 4 digits of account number 8964	\$1,103.00
4	Nonpriority Creditor's Name Po Box 673	When was the debt incurred? 02/14	
	Minneapolis, MN 55440		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ıt
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card purchases for groceries and household supplies	
4.1 5	Tempoe LLC  Nonpriority Creditor's Name	Last 4 digits of account number	\$1,454.74
	7755 Montgomery Rd Cincinnati, OH 45236	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	ot
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Credit card purchases for personal expenses	
4.1	Verizon by American InfoSource as Agent	Last 4 digits of account number 0001	\$3,320.00
	Nonpriority Creditor's Name PO Box 4457 Houston, TX 77210	When was the debt incurred? 10/01	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did no	t
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Past due utility bills	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1	Matthew A Manges		
Debtor 2	Christina L Manges	Case number (if known)	25-20845

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 35,831.22
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 35,831.22

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mation to identify your	case:		
Matthew A Mange	es		
First Name	Middle Name	Last Name	
Christina L Mang	es		
First Name	Middle Name	Last Name	
ankruptcy Court for the:	WESTERN DISTRICT O	DF PENNSYLVANIA	
25-20845			☐ Check if this is an amended filing
	Matthew A Mange First Name Christina L Mange First Name ankruptcy Court for the:	Christina L Manges First Name Middle Name  Inkruptcy Court for the: WESTERN DISTRICT C	Matthew A Manges  First Name Middle Name Last Name  Christina L Manges  First Name Middle Name Last Name  unkruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	

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Fill in thi					
	s information to identify your	case:			
Debtor 1	Matthew A Mang	es			
	First Name	Middle Name	Last Name		
Debtor 2	Christina L Mang				
(Spouse if, fi	lling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	WESTERN DISTRICT (	OF PENNSYLVANIA		
Case nun	nber <b>25-20845</b>				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	lebtors			12/15
<del></del>	dale III. I dai dea	COLOIS			12/13
ill it out, our nam		boxes on the left. Attach ). Answer every question	the Additional Page to	o this page. On the top o	ded, copy the Additional Page, of any Additional Pages, write
_	,	,			
■ No					
LIYE	es .				
	thin the last 8 years, have young, California, Idaho, Louisiana				tates and territories include
■ No	o. Go to line 3.				
	es. Did your spouse, former spo	use or legal equivalent live	with you at the time?		
	o. Dia your opouco, former opo	aco, or logar oquivalent live	war you at the time.		
	down A. Pat all at come and de-				
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	sure you have listed the	creditor on Schedule D (Official
in lin Form	e 2 again as a codebtor only n 106D), Schedule E/F (Officia	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	sure you have listed the 6G). Use Schedule D, So	creditor on Schedule D (Official hedule E/F, or Schedule G to fil tor to whom you owe the debt
in lin Form out (	e 2 again as a codebtor only n 106D), Schedule E/F (Officia Column 2.  Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	Column 2: The credi	creditor on Schedule D (Official hedule E/F, or Schedule G to fil tor to whom you owe the debt
in lin Form	e 2 again as a codebtor only n 106D), Schedule E/F (Officia Column 2.  Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	Column 2: The credi Check all schedule D, line	creditor on Schedule D (Official thedule E/F, or Schedule G to fill tor to whom you owe the debt that apply:
in lin Form out (	ne 2 again as a codebtor only a 106D), Schedule E/F (Official Column 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	Column 2: The credi Check all schedule D, line Schedule D, line Schedule E/F, line	creditor on Schedule D (Official shedule E/F, or Schedule G to file tor to whom you owe the debt that apply:
in lin Form out (	ne 2 again as a codebtor only 106D), Schedule E/F (Official Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	Column 2: The credi Check all schedule D, line	that apply:
in lin Form out (	ne 2 again as a codebtor only a 106D), Schedule E/F (Official Column 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make s	Column 2: The credi Check all schedule D, line Schedule D, line Schedule E/F, line	creditor on Schedule D (Official shedule E/F, or Schedule G to file tor to whom you owe the debt that apply:
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Official Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make sule G (Official Form 10	Column 2: The credicheck all schedule D, Single Schedule D, line Schedule E/F, line Schedule G, line	creditor on Schedule D (Official shedule E/F, or Schedule G to fill tor to whom you owe the debt that apply:
in lin Form out (	ne 2 again as a codebtor only 106D), Schedule E/F (Official Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make sule G (Official Form 10	Column 2: The credicheck all schedule D, Son Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line	creditor on Schedule D (Official shedule E/F, or Schedule G to fill tor to whom you owe the debt that apply:
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Official Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Zename  Name  Number Street  City	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make sule G (Official Form 10	Column 2: The credicheck all schedule D, Single Schedule D, line Schedule E/F, line Schedule G, line	creditor on Schedule D (Official shedule E/F, or Schedule G to fill the tor to whom you owe the debt that apply:
in lin Form out C	ne 2 again as a codebtor only 106D), Schedule E/F (Official Column 2.  Column 1: Your codebtor Name, Number, Street, City, State and Zename  Name  Number Street  City	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make sule G (Official Form 10	Column 2: The credicheck all schedule D, Son Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line	creditor on Schedule D (Official shedule E/F, or Schedule G to fill the tor to whom you owe the debt that apply:

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Debtor 2		Manges		
(Spouse, if filing)	Christina L	Manges		
	otcy Court for the	e: WESTERN DISTRIC	T OF PENNSYLVANIA	
Case number 25	-20845			Check if this is:
(If known)			_	☐ An amended filing
				☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Form	106I			MM / DD/ YYYY
Schedule I:	Your Inc	ome		12/1
	et to this form.			on about your spouse. If more space is needed, case number (if known). Answer every questio
Part 1: Describ	e Employment		ional pages, write your name and	case number (if known). Answer every questio
Part 1: Describ	e Employment			
Part 1: Describ  1. Fill in your empinformation.  If you have more	loyment than one job,	On the top of any additi	ional pages, write your name and	case number (if known). Answer every questio
Part 1: Describ  1. Fill in your empinformation.  If you have more attach a separate information about	loyment than one job, e page with		ional pages, write your name and	case number (if known). Answer every question  Debtor 2 or non-filing spouse
Part 1: Describ  1. Fill in your empinformation.  If you have more attach a separate	loyment than one job, e page with	On the top of any additi	Debtor 1  Employed	Debtor 2 or non-filing spouse
Part 1: Describ  1. Fill in your empinformation.  If you have more attach a separate information about	than one job, e page with additional	On the top of any addition	Debtor 1  Employed  Not employed	Debtor 2 or non-filing spouse  Employed  Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		btor 2 or ng spouse
2.	\$	9,356.53	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	9,356.53	\$	0.00

Official Form 106l Schedule I: Your Income page 1

	otor 1 otor 2	Matthew A Manges Christina L Manges	_		Case	number (if known)	25	-20845		
						Debtor 1		or Debtor on-filing s	spouse	
	Cop	by line 4 here	4.		\$_	9,356.53	\$		0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	2,665.91	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5k		<b>\$</b> -	0.00	\$		0.00	-
	5c.	Voluntary contributions for retirement plans	50		\$_	879.52	\$		0.00	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	188.78	\$		0.00	-
	5e.	Insurance	56	Э.	\$_	156.67	\$		0.00	
	5f.	Domestic support obligations	5f		\$	0.00	\$		0.00	-
	5g.	Union dues	50	g.	\$	0.00	\$		0.00	-
	5h.	Other deductions. Specify:	5ł	า.+	\$_	0.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	3,890.88	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,465.65	\$		0.00	_
8.	8b. 8c. 8d. 8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	86 86 86	o. d. e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00	
	8g.	Pension or retirement income	80		\$_	0.00	\$		0.00	
	8h.	Other monthly income. Specify: Prorated Tax Refund	8h	Դ.+	\$_	804.33	+ \$		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$	804.33	\$		0.00	)
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		6,269.98 + \$		0.00	= \$	6,269.98
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		٠-		,			-	0,200.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r dep				•	n <i>Schedul</i> e	e <i>J.</i> +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reserved that amount on the Summary of Schedules and Statistical Summary of Certailies							\$Combin	6,269.98 ned
13.	=	you expect an increase or decrease within the year after you file this form	1?						monthly	y income
		Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

	in this information	diameter interestifence				1		
FIII	in this informa	ation to identify yo	ur case:					
Deb	otor 1	Matthew A M	langes				k if this is:	
Deb	otor 2	Christina L N	langes			_	An amended filing A supplement show	ving postpetition chapter
	ouse, if filing)	Omistina E ii	ariges				13 expenses as of	
Unit	ted States Bank	ruptcy Court for the:	: WESTE	RN DISTRICT OF PENNS	SYLVANIA	-	MM / DD / YYYY	
Cas	se number 2	5-20845						
(If k	nown)							
0	fficial Fo	rm 106J						
		J: Your I	 Exper	ises				12/1
Be info	as complete ormation. If m	and accurate as	possible. eded, atta	If two married people ar ch another sheet to this				or supplying correct
Par 1.	t 1: Desc	ribe Your House	hold					
١.	□ No. Go to							
		es Debtor 2 live i	in a separa	ate household?				
	<b>=</b> N	lo	·	al Form 106J-2, <i>Expen</i> ses	s for Separate House	e <i>hold</i> of Debt	or 2.	
2.		e dependents?	□ No		•			
۷.	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		14 Years	Yes
					Son		20 Years	□ No ■ Yes
								■ res □ No
								☐ Yes
								□ No
3.	Do your exi	penses include	_					☐ Yes
0.	expenses of	of people other the d your depender	han _	No Yes				
Est	timate your e	a date after the b	our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgage	e 4. \$		0.00
	. ,	ded in line 4:	3					
						40 M		402.00
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. \$ 4b. \$		192.00 253.37
		maintenance, re				4c. \$		0.00
_		owner's associat				4d. \$		0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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Deb	tor 1 Matthew A Manges			
Deb	tor 2 Christina L Manges	Case number	r (if known)	25-20845
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a. \$		405.00
	6b. Water, sewer, garbage collection	6b. \$		150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$		400.00
	6d. Other. Specify:	6d. \$		0.00
7.	Food and housekeeping supplies	7. \$		1,200.00
8.	Childcare and children's education costs	8. \$		150.00
9.	Clothing, laundry, and dry cleaning	9. \$		200.00
-	Personal care products and services	10. \$		150.00
11.		11. \$		220.00
	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	🗸		220.00
	Do not include car payments.	12. \$		450.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$		250.00
	Charitable contributions and religious donations	14. \$		50.00
15.	Insurance.		-	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a. \$		0.00
	15b. Health insurance	15b. \$		0.00
	15c. Vehicle insurance	15c. \$		213.07
	15d. Other insurance. Specify:	15d. \$		0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16. \$		0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a. \$		0.00
	17b. Car payments for Vehicle 2	17b. \$		0.00
	17c. Other. Specify:	17c. \$		0.00
	17d. Other. Specify:	17d. \$		0.00
18.	Your payments of alimony, maintenance, and support that you did not report a			0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)			0.00
19.	Other payments you make to support others who do not live with you.	\$		0.00
	Specify:	19.	_	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sci			
	20a. Mortgages on other property	20a. \$		0.00
	20b. Real estate taxes	20b. \$		0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$		0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$		0.00
	20e. Homeowner's association or condominium dues	20e. \$		0.00
21.	Other: Specify: Pet Expenses	21+	\$	90.00
22	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,373.44
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	,	\$	.,,,,,,,
	22c. Add line 22a and 22b. The result is your monthly expenses.	·	\$	4 272 44
	22c. Add line 22a and 22b. The result is your monthly expenses.		<b>a</b>	4,373.44
23.	Calculate your monthly net income.	_		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		6,269.98
	23b. Copy your monthly expenses from line 22c above.	23b9	\$	4,373.44
				·
	23c. Subtract your monthly expenses from your monthly income.			4 900 54
	The result is your monthly net income.	23c. \$		1,896.54
24.	Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  No.			ase or decrease because of a
	☐ Yes. Explain here:			
	Explain hold.			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Matthew A Mange	ne .			
200101	First Name	Middle Name	Las	st Name	
Debtor 2	Christina L Mange	es			
(Spouse if, filing)	First Name	Middle Name	Las	st Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	F PENNS	/LVANIA	
Case number	25-20845				
(if known)					Check if this is an amended filing
Declarat	tion About a	n Individual	Debt	or's Schedules	12/15
f two married pe	eople are filing together	, both are equally respon	sible for s	supplying correct information.	
obtaining money		connection with a bank		ed schedules. Making a false stat e can result in fines up to \$250,00	
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sumr	mary and s	schedules filed with this declaration	on and
X /s/ Mat	thew A Manges		х	/s/ Christina L Manges	
	ew A Manges			Christina L Manges	
	re of Debtor 1			Signature of Debtor 2	

Date May 2, 2025

Date May 2, 2025

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		mation to identify you	case:			
Deb	otor 1	Matthew A Mang	Jes Middle Name	Last Name		
Deb	otor 2	Christina L Man		Zaot Namo		
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Cas	e number	25-20845				
(if kn	own)				_	heck if this is an mended filing
Of	ficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	04/25
					equally responsible for sup	
nfo	rmation. If n	nore space is needed,	attach a separate sheet to		additional pages, write you	
num	ber (if know	n). Answer every ques	stion.			
Par	t 1: Give	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is yoเ	ır current marital statu	ıs?			
	■ Married	i				
	□ Not ma	rried				
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
		st all of the places you li	ived in the last 3 years. Do no	ot include where you live now	•	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
			lived there			lived there
					ity property state or territory	` ,,,,
state	es and territor	nes include Arizona, Ca	iliornia, idano, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
	■ No					
	☐ Yes. M	ake sure you fill out <i>Sch</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
Par	t 2 Expla	in the Sources of You	r Income			
_						
4.			<b>nployment or from operatin</b> u received from all jobs and a		ear or the two previous caler time activities.	ıdar years?
		,	have income that you receive	, 01		
	□ No					
	_	Il in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$30,428.16	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

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Debtor 2 Christina L N	Ca	Case number (if known) 25-20845				
	Debte	or 1		Debtor 2		
		ces of income k all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 3		ages, commissions, ses, tips	\$122,446.00	☐ Wages, combonuses, tips	missions,	\$0.00
	□ Op	perating a business		☐ Operating a	business	
For the calendar year bef (January 1 to December 3	24 2022 \	ages, commissions, ses, tips	\$117,745.00	☐ Wages, combonuses, tips	missions,	\$0.00
	□ Op	perating a business		☐ Operating a	business	
List each source and the No Yes. Fill in the det	·	n each source separat	ely. Do not include income	that you listed in lir	ne 4.	
	Debto	or 1		Debtor 2		
	Source	ees of income ibe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3: List Certain Pay	ments You Made I	Before You Filed for I	Bankruptcy			
individual p  During the s  No.  Yes  * Subject to	btor 1 nor Debtor 2 rimarily for a person 90 days before you Go to line 7. List below each cre paid that creditor. I not include paymen o adjustment on 4/0 r Debtor 2 or both	2 has primarily consustal, family, or household filed for bankruptcy, did editor to whom you paid to not include payments to an attorney for the 1/28 and every 3 years thave primarily consustal.	Imer debts. Consumer debt d purpose." d you pay any creditor a tot d a total of \$8,575* or more ts for domestic support obli his bankruptcy case. s after that for cases filed or	al of \$8,575* or mo in one or more pay gations, such as ch n or after the date o	re? /ments and th nild support and f adjustment.	ne total amount you nd alimony. Also, do
□ Yes		or domestic support of	d a total of \$600 or more ar oligations, such as child sup			
Creditor's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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Debtor 1 Matthew A Manges

Debto	or 2 Christina L Manges		Cas	e number (if known)	25-20845	
Ir of a	Vithin 1 year before you filed for bankrup nsiders include your relatives; any general pure of which you are an officer, director, person business you operate as a sole proprietor. Ilimony.	partners; relatives of any ger in control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you g securities; and an	u are a general ly managing ag	partner; corporations ent, including one for
	No Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
	Vithin 1 year before you filed for bankrup nsider?	ptcy, did you make any pay			count of a del	bt that benefited an
In	nclude payments on debts guaranteed or co	osigned by an insider.				
	No ☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for t	
Part 4	4: Identify Legal Actions, Repossession		paid	Still Owe	include credit	or s name
Li	Vithin 1 year before you filed for bankrup ist all such matters, including personal injurt nodifications, and contract disputes.	ptcy, were you a party in a				
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Vithin 1 year before you filed for bankrup Check all that apply and fill in the details bel		erty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
	No. Go to line 11. Yes. Fill in the information below.					
(	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			
	Vithin 90 days before you filed for bankro accounts or refuse to make a payment be ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any ar	nounts from your
(	Creditor Name and Address	Describe the action the	e creditor took	Date a	action was	Amount
	Vithin 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possess	ion of an assignee	e for the benef	it of creditors, a
	■ No □ Yes					
Part 5	5: List Certain Gifts and Contributions	s				
	Vithin 2 years before you filed for bankru  No	uptcy, did you give any gift	s with a total value	of more than \$600	) per person?	
	Gifts with a total value of more than \$600	0 Describe the gifts			you gave	Value
F	per person  Person to Whom You Gave the Gift and Address:			the gi	แร	

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Deb	otor 2 Christina L Manges		Case number (if known)	25-20845
14.	Within 2 years before you filed for banks  ■ No □ Yes. Fill in the details for each gift or or		contributions with a total value of	of more than \$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total Describe what you co		s you Value ibuted
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	uptcy or since you filed for bank	ruptcy, did you lose anything be	cause of theft, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coveral include the amount that insurance insurance claims on line 33 of So	ce has paid. List pending loss	of your Value of property lost
Par	t 7: List Certain Payments or Transfer	s		
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition Include	preparing a bankruptcy petition	1?	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value transferred		payment Amount of payment
	Foster Law Offices 1210 Park Avenue Meadville, PA 16335 dan@mrdebtbuster.com	Expenses: \$500.00 Legal Fee Retainer:	\$500.00	3, 2025 \$1,000.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed not include any payment or transfer that  No Yes. Fill in the details.	ditors or to make payments to y		er any property to anyone who
	Person Who Was Paid Address	Description and value transferred		payment Amount of payment
	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No  Yes. Fill in the details.	ur business or financial affairs? s made as security (such as the g	,	
	Person Who Received Transfer Address  Person's relationship to you	Description and value property transferred	e of Describe any prop payments receive paid in exchange	ed or debts made

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25-20845 Case number (if known) Debtor 2 Christina L Manges 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☐ Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number closed, sold. before closing or Address (Number, Street, City, State and ZIP instrument Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code)

#### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1

Matthew A Manges

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Case number (if known) 25-20845

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	unc	der or in violation of an environme	ental law?
		No				
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of hazardous material?			
		No				
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	roni	mental law? Include settlements a	and orders.
		No				
		Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	f 11•	Give Details About Your Business or	Connections to Any Business			
		_	·			
27.	Witi	nin 4 years before you filed for bankrupt		-	•	business?
		A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	er full-time or part-time	
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (L	LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing exe	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to P	art 12.			
		Yes. Check all that apply above and fill		<b>.</b>		
		siness Name	Describe the nature of the business		Employer Identification number	
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.
	(	,	Name of accountant of bookkeeper		Dates business existed	
28.	Witl inst	nin 2 years before you filed for bankruptoitutions, creditors, or other parties.	cy, did you give a financial statement (	to ar	nyone about your business? Inclu	de all financial
		No				
		Yes. Fill in the details below.				
	Na		Date Issued			
		dress wher, Street, City, State and ZIP Code)				

Debtor 1 Matthew A Manges

Debtor 2 Christina L Manges

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Debtor 1	Matthew A Manges	G		
Debtor 2	Debtor 2 Christina L Manges		Case number (if known)	25-20845
Part 12:	Sign Below			
are true a	nd correct. I understand that making	inancial Affairs and any attachments, a false statement, concealing propert to \$250,000, or imprisonment for up to	y, or obtaining money or	, , , ,
/s/ Mattl	hew A Manges	/s/ Christina L Manges		
Matthey	v A Manges	Christina L Manges		
Signatur	e of Debtor 1	Signature of Debtor 2		
Date N	lay 2, 2025	Date May 2, 2025		
Did you a ■ No □ Yes	ttach additional pages to Your Staten	nent of Financial Affairs for Individual	s Filing for Bankruptcy (	Official Form 107)?
Did you p ■ No	ay or agree to pay someone who is n	ot an attorney to help you fill out bank	kruptcy forms?	
☐ Yes. N	ame of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declara	ation, and Signature (Offici	ial Form 119).

Fill in this inforr	Fill in this information to identify your case:				
Debtor 1	Matthew A Manges				
Debtor 2 (Spouse, if filing)	On louis 2 mangoo				
United States E	Bankruptcy Court for the: Western District of Pennsylvania				
Case number (if known)	25-20845				

Check	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	9,566.96	\$	0.00
<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a spoyou listed on line 3.	ort. Includ	le regulaı depende	contributions nts, parents,	\$	0.00	\$	0.00
Net income from operating a business, profession, or farm	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
Net monthly income from rental or other real property	, ¢	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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)ebtoi )ebtoi				Case numb	oer ( <i>if kno</i>	wn) <b>25-20845</b>	5	
				Column A Debtor 1	•	Column B Debtor 2	or	
7.	Interest, dividends, and royalties			\$	0.0	00 \$	0.00	
8.	Unemployment compensation			\$	0.0	00 \$	0.00	
	Do not enter the amount if you contend that the the Social Security Act. Instead, list it here:		efit under					
	For you	\$	0.00					
	For your spouse	\$	0.00					
	Pension or retirement income. Do not include benefit under the Social Security Act. Also, ex not include any compensation, pension, pay, a United States Government in connection with disability, or death of a member of the uniform pay paid under chapter 61 of title 10, then includes not exceed the amount of retired pay to if retired under any provision of title 10 other the	cept as stated in the next sent annuity, or allowance paid by t a disability, combat-related inj led services. If you received ar ude that pay only to the extent which you would otherwise be	tence, do the tury or ny retired t that it	\$	0.0	00 \$	0.00	
10.	Income from all other sources not listed ab Do not include any benefits received under the received as a victim of a war crime, a crime as domestic terrorism; or compensation, pension United States Government in connection with disability, or death of a member of the uniform sources on a separate page and put the total	pove. Specify the source and a social Security Act; payment gainst humanity, or internation, pay, annuity, or allowance para disability, combat-related injuded services. If necessary, list	ts al or aid by the ury or					
	Prorated Tax Refund			\$	804.3	33 \$	0.00	
				\$	0.0	00 \$	0.00	
	Total amounts from separate pages,	if any.		\$	0.0		0.00	
						<u> </u>		
	Calculate your total average monthly incon each column. Then add the total for Column A		\$1	0,371.29	+ \$	0.00	= \$10,	371.29
art	2: Determine How to Measure Your Dec	ductions from Income					Total av monthly	verage y income
12.	Copy your total average monthly income fr	om line 11.					\$10,	371.29
13.	Calculate the marital adjustment. Check on You are not married. Fill in 0 below.	e:						
	_							
	You are married and your spouse is filing	,						
	You are married and your spouse is not fill in the amount of the income listed in I dependents, such as payment of the spo Below, specify the basis for excluding this adjustments on a separate page.	line 11, Column B, that was No use's tax liability or the spouse	e's suppor	t of someo	ne othe	er than you or you	ur dependents	S.
	If this adjustment does not apply, enter 0	holow						
	ii tilis adjustifierit does not apply, enter o	below.	\$					
	<del>-</del>		_					
			+\$					
	Total		\$	0.	00	Copy here=>		0.00
14.	Your current monthly income. Subtract lin	e 13 from line 12.					\$10,	371.29
15.	Calculate your current monthly income fo	r the year. Follow these step	s:					
	15a. Copy line 14 here=>						<sub>\$</sub> 10,	371.29

**Matthew A Manges** 

Debtor 1

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Debtor 1 Debtor 2		latthew A Manges Christina L Manges		Case number ( <i>if known</i> ) <b>25-20845</b>			
		Multiply line 15a by 12 (the number of months in a y	ear).			<b>x</b> 12	
1	5b.	The result is your current monthly income for the year	ar for this part of the form			\$ 124,455.48	
16. <b>C</b> a	ilcu	late the median family income that applies to you.	Follow these steps:				
16	a. F	ill in the state in which you live.	PA				
16	b. F	ill in the number of people in your household.	4				
	T ir	ill in the median family income for your state and size of find a list of applicable median income amounts, go astructions for this form. This list may also be available	online using the link spe			\$125,754.00	
		lo the lines compare?					
17	a.	■ Line 15b is less than or equal to line 16c. On the 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT					
17	b.	Line 15b is more than line 16c. On the top of part 1325(b)(3). Go to Part 3 and fill out Calculating your current monthly income from line 14 above	on of Your Disposable				
Part 3:		Calculate Your Commitment Period Under 11 U.S.	C. § 1325(b)(4)				
18. <b>C</b> c	ру	your total average monthly income from line 11 .			\$	10,371.29	
co sp	nter ous	et the marital adjustment if it applies. If you are mand that calculating the commitment period under 11 U. e's income, copy the amount from line 13. the marital adjustment does not apply, fill in 0 on line	S.C. § 1325(b)(4) allows		our <b>-</b> \$	0.00	
19	b. <b>S</b>	ubtract line 19a from line 18.				\$10,371.29	
20. <b>C</b> a	alcu	late your current monthly income for the year. Fo	low these steps:				
20	a. C	copy line 19b				\$10,371.29	
	Ν	fultiply by 12 (the number of months in a year).				<b>x</b> 12	
20	b. T	he result is your current monthly income for the year	or this part of the form			\$124,455.48	
20	c. C	copy the median family income for your state and size	of household from line 1	6c		\$ <u>125,754.00</u>	
21	. н	low do the lines compare?					
		Line 20b is less than line 20c. Unless otherwise o period is 3 years. Go to Part 4.	rdered by the court, on the	ne top of page 1 of this f	orm, check bo	ox 3, The commitment	
		Line 20b is more than or equal to line 20c. Unless commitment period is 5 years. Go to Part 4.	otherwise ordered by th	e court, on the top of pa	ge 1 of this fo	rm, check box 4, The	
Part 4:		Sign Below					
Ву	sig	ning here, under penalty of perjury I declare that the in	nformation on this statem	ent and in any attachme	ents is true ar	nd correct.	
X /s	s/ N	latthew A Manges	X /s/ Chr	istina L Manges			
N	/latt	hew A Manges	Christi	na L Manges			
	-	Ature of Debtor 1	· ·	re of Debtor 2			
	_	May 2, 2025  MM / DD / YYYY  Chacked 17a, do NOT fill out or file Form 122C 2		lay 2, 2025 IM / DD / YYYY			

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Debtor 1 Debtor 2 Christina L Manges
Christina L Manges
Case number (if known)
25-20845

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Debtor 2 Christina L Manges

Case number (if known) 25-20845

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 10/01/2024 to 03/31/2025.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: VA Pittsburgh Health Care

Income by Month:

6 Months Ago:	10/2024	\$8,491.20
5 Months Ago:	11/2024	\$8,491.20
4 Months Ago:	12/2024	\$9,991.20
3 Months Ago:	01/2025	\$13,154.56
2 Months Ago:	02/2025	\$8,636.80
Last Month:	03/2025	\$8,636.80
	Average per month:	\$9,566.96

Line 10 - Income from all other sources Source of Income: Prorated Tax Refund Constant income of \$804.33 per month.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 25-20845-GLT Doc 27 Filed 05/02/25 Entered 05/02/25 15:22:12 Desc Main Document Page 45 of 46

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Western District of Pennsylvania

In re	Matthew A Mar Christina L Ma		Case No.	25-20845			
		900	Debtor(s)	Chapter	13		
	DISC	CLOSURE OF COMI	PENSATION OF ATTOR	NEY FOR DE	CBTOR(S)		
١.	compensation paid to	me within one year before the	016(b), I certify that I am the attorned filing of the petition in bankruptcy, ion of or in connection with the bank	or agreed to be paid	to me, for services rendered or to		
	For legal service	es, I have agreed to accept		\$	5,000.00		
	Prior to the filing	g of this statement I have receive	ved	\$	500.00		
	Balance Due			\$	4,500.00		
2.	The source of the com	npensation paid to me was:					
	Debtor	☐ Other (specify):					
3.	The source of comper	nsation to be paid to me is:					
	Debtor	☐ Other (specify):					
l.	■ I have not agreed	to share the above-disclosed co	ompensation with any other person u	unless they are mem	bers and associates of my law firm		
			pensation with a person or persons we names of the people sharing in the				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul> <li>b. Preparation and file</li> <li>c. Representation of</li> <li>d. [Other provisions</li> <li>Negotiation</li> <li>reaffirmation</li> </ul>	ling of any petition, schedules, the debtor at the meeting of cre as needed] ns with secured creditors	endering advice to the debtor in dete statement of affairs and plan which editors and confirmation hearing, and to reduce to market value; exe ations as needed; preparation household goods.	may be required; d any adjourned hea mption planning;	rings thereof; preparation and filing of		
<b>5</b> .	Representa		d fee does not include the following dischargeability actions, judic		es, relief from stay actions or		
			CERTIFICATION				
	I certify that the foreg bankruptcy proceeding		f any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in		
ľ	May 2, 2025		/s/ Daniel P Foste	r			
1	Date		Daniel P Foster				
			Signature of Attorney Foster Law Office				
			1210 Park Avenue				
			Meadville, PA 163 814-724-1165 Fax				
			dan@mrdebtbust				
			Name of law firm				

### United States Bankruptcy Court Western District of Pennsylvania

In re	Mattnew A Manges Christina L Manges		Case No.	25-20845
		Debtor(s)	Chapter	13

### **VERIFICATION OF CREDITOR MATRIX**

The above-named Debtors hereb	v verify	that the	e attached li	st of creditor	s is true and	correct to the	best of	their kno	owledge
	J								

Date:	May 2, 2025	/s/ Matthew A Manges  Matthew A Manges
		Signature of Debtor
Date:	May 2, 2025	/s/ Christina L Manges
		Christina L Manges
		Signature of Debtor